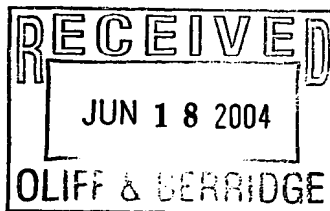
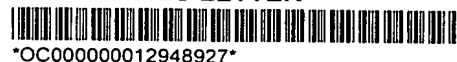


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IFW

APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/765,880	01/29/2004	Chris T. Burket	118166

 25944
 OLIFF & BERRIDGE, PLC
 P.O. BOX 19928
 ALEXANDRIA, VA 22320

 CONFIRMATION NO. 2293
 FORMALITIES LETTER


OC000000012948927

Date Mailed: 06/16/2004

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

Items Required To Avoid Abandonment:

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The application was filed in a language other than English. Applicant is required to provide an English translation of the specification and a statement that the translation is accurate. (See 37 CFR 1.52(d)).
- Applicant must file an English translation of the application, the \$ 130 fee set forth in 37 CFR 1.17(i), unless previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)).
- Because your specification was filed in a language other than English, the Office was unable to determine the number of claims submitted. Additional claim fees may be due once the number of claims can be determined.

SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is **\$260** for a Large Entity

- **\$130** Late oath or declaration Surcharge.
- **\$130** for English translation surcharge required.

Replies should be mailed to: Mail Stop Missing Parts
 Commissioner for Patents

08/17/2004 GWORDOF1 00000118 10765880

 01 FC:1051 130.00 OP
 02 FC:1053 130.00 OP

P.O. Box 1450
Alexandria VA 22313-1450

*A copy of this notice **MUST** be returned with the reply.*

N. Nguyen
Customer Service Center
Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Chris T. BURKET et al.

Attn: **Mail Stop Missing Parts**

Application No.: 10/765,880

Filed: January 29, 2004

Docket No.: 118166

For: ELECTROLYTIC CAPACITOR

**RESPONSE TO NOTICE TO FILE MISSING PARTS
WITH DECLARATION AND TRANSLATION**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Notice to File Missing Parts of Application - Filing Date Granted (copy attached) mailed on June 16, 2004, submitted herewith is the executed Declaration of the inventors and a Power of Attorney. Any necessary Designation of Ten Attorneys for Power of Attorney or Transmittal of Power of Attorney and Statement Under 37 C.F.R. §3.73(b) is also attached. Also submitted herewith is, upon information and belief, an accurate translation of the application. Any specification attached to and referenced in the Declaration is a copy of the specification and any amendments thereto which were filed in the Office in order to obtain a filing date for the application.

☐ A preliminary amendment is also attached.

	(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY			OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER TRANSLATION	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADD'L FEE	OR	RATE	ADD'L FEE
TOTAL CLAIMS	*8 MINUS	**20	=0	x 9	\$		x 18	\$
INDEP CLAIMS	*2 MINUS	***3	=0	x 43	\$		x 86	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+145	\$	OR	+290	\$
					\$			\$

* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.


The "Highest Number Previously Paid For" in this space (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

Attached is our Check No. 157356 for ☒\$260.00 ☐\$195.00 (entitlement to small entity status is asserted) for the fee under 37 C.F.R. §1.16(e) and §1.17(i) and any excess claim fees noted above.

Entry of these documents should complete all of the filing formalities and fully satisfy all requirements of the Notice to File Missing Parts. Examination and allowance of this application in due course are respectfully solicited.

The Commissioner is hereby authorized to charge any additional fee (or credit any overpayment) associated with this communication to Deposit Account No. 15-0461. Two duplicate copies of this paper are attached.

Respectfully submitted,



James A. Oliff
Registration No. 27,075

Joel S. Armstrong
Registration No. 36,430

JAO:JSA/amo

Date: August 16, 2004

OLIFF & BERRIDGE, PLC
P.O. Box 19928
Alexandria, Virginia 22320
Telephone: (703) 836-6400

**DEPOSIT ACCOUNT USE
AUTHORIZATION**

Please grant any extension
necessary for entry;
Charge any fee due to our
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